Office of Labor Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215-0188 Expires 11-30-2006

This report is mandatory under P L. 86-257 as amended. Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

OLMS &	
1 File Number U 033 178	2 Fiscal Year Covered From
10/15	07 / 01 / 2004 Through 06 / 30 / 2005
3 Name and address of person filing	4 Name file number and address of labor organization
Name Clarence Parker	Name UA Plumbers Local 63
	Labor Organization File Number 033 178
PO Box Bldg Room No if any	P O Box Building and Room Number if any
Street 3519 Pemford Court	Street 116 Harvey Court
City Peoria -	- City East Peoria
State Illinois ZIP Code + 4 61604	State Illinois zip Code + 4 61611
5 Position in labor organization Executive Board Officer	
A. Held an interest in engaged in transactions (including loans) with or monetary value from an employer whose employees your organization. Name and address of Employer (including trade name if any) Name I/A Plumbers I ocal 63	7 a Nature of Interest Transaction or Income
Name UA Plumbers Local 63 Trade Name if any	Please be advised that, based on the records that are currently in my possession related to the Fiscal year 2004, I do not have to the best of my knowledge any LM-30 reportable transactions. I am
PO Box Bidg Room No If any	filing this form in order to qualify as part of the DOL amnesty filing for 2004 and the prior five years 7 b Amount.
Street 116 Harvey Court	
City East Peoria	
State Illinois ZiP Code + 4 61611	
មារ Signature - ចាម រ	
15 Signature and verification The undersigned declares under penalty of Penjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned s knowledge and belief true correct and complete (See the section on penalties in the instructions)	
Signed Olgrence total	On 8/3/05 -= (309) 680-6875
	Date Telephone Number

Name of Person Filing Clarence Parker	File Number U 033 178
B Held an interest in or derived income or economic benefit with monetary via substantial part of which consists of buying from selling or leasing to or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to or otherwise
8 Name and address of Business (including trade name if any) Name Trade Name if any P O Box, Bidg Room No if any Street City State ZIP Code + 4	9 Business deals with a Labor Organization b Trust c Employer 1 1 a Nature of such dealing
10 If 9 b or 9 c is checked give trust or employees name Name Trade Name If any PO Box, Bidg Room No if any Street City State ZIP Code + 4	1 II b Approximate dollar value of such dealing 12 a Nature of interest held or income received
	12 b Amount.
C Received from any employer (other than an employer covered undor from any labor relations consultant to an employer any payment of money 13 a. Name and address of Employer or Labor Relations Consultant	er parts A and B above; y or other thing of value
(including trade name if any) Name Trade Name If any P O Box, Bldg Room No if any Street City State ZIP Code + 4	
13 b is the Business an Employer or Consultant ?	14 b Amount of payment.